

237385

STATE OF SOUTH CAROLINA

COPY  
Posted: ted

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

(Caption of Case)

Example: Application for a Class C Charter Certificate from  
John Doe dba Doe's Limo

Dept: N/A

Date: 6/27/12

TRANSPORTATION COVER SHEET

WILLIAM C. BROWN  
dba  
BB'S LIMO CAR SERVICES

Time: 2:30

DOCKET  
NUMBER: 2012-257-T

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: WILLIAM C. BROWN

Telephone: 843-899-6909-312-02

Address: 102 LOBLOLLY DR.

Fax: 843-745-0971

MONCK'S CORNER, S.C.  
29461

Other: \_\_\_\_\_

Email: WilliamBrown102@yahoo.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- Application - Class A/A Restricted
- Application - Class C Taxi
- Application - Class C Charter
- Application - Class C Charter Bus
- Application - Class C Non-Emergency
- Application - Class C Stretcher Van
- Application - Class E Household Goods
- Application - Class E Hazardous Waste
- Application
- Request for Extension to Comply with Order
- Request for Order Granting Authority to Obtain a Certificate of Public Convenience and Necessity to be Rescinded
- Request for Cancellation of Certificate
- Request for Suspension
- Request for Reinstatement
- Request for Name Change on Certificate
- Request to Amend Scope of Authority
- Request to Amend Tariff (rate increase, etc.)
- Request to Amend Passenger Limit
- Request
- Exhibit
- Late-Filed Exhibit
- Letter
- Proposed Order
- Publisher's Affidavit
- Reservation Letter
- Response
- Return to Petition
- Other: \_\_\_\_\_

RECEIVED  
JUN 27 2012  
ted  
PSC SC  
MAIL / DMS

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

ted

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  
101 Executive Center Drive, Suite 100  
Columbia, South Carolina 29210  
(Mailing address: Post Office Drawer 11649, Columbia, SC 29211)

Phone: (803) 896-5100 Fax: (803) 896-5199

**APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR  
OPERATION OF MOTOR VEHICLE CARRIER**

Date: JUNE 25, 2012

**CLASS C - CHARTER**

Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.

1. Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name.)

BB's Limo CAR SERVICES

102 LOBLOCCY DR, MONCK'S CORNER, SC 29461  
Street Address of Applicant

P.O. BOX 1408, MONCK'S CORNER S.C. 29461  
Mailing Address of Applicant (if different from street address)

843-899-6909-843-312-0233 843-745-0971  
Phone Fax

William Brown 102 @ Yahoo.com  
Email Address

2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)

3. Select Entity Type: (Check one)

- Individual Owner/Sole Proprietorship
- Partnership - List names and addresses of all person having an interest in the business.
- Corporation - List names and addresses of two principal officers.

---



---



---



---

Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

**BALANCE SHEET**

Balance at Time Application is Filed:

Month JUNE Year 2012

**Assets:**

|                                      |              |
|--------------------------------------|--------------|
| Cash                                 |              |
| Receivables                          |              |
| Real Estate                          | \$ 70,000.00 |
| Buildings and Equipment (Net)        |              |
| Motor Vehicles (Net)                 | \$ 19,500.00 |
| Garage Equipment (Net)               | \$ 1,500.00  |
| Machinery and Tools (Net)            |              |
| Supplies on Hand                     |              |
| Prepays and Other Assets             |              |
| <b>Total Assets*</b>                 | \$ 91,000.00 |
| <b>Liabilities and Equity:</b>       |              |
| Accounts Payable                     |              |
| Notes Payable                        |              |
| Mortgages Payable                    | \$ 434.86    |
| Equipment Obligations                | \$ 200.00    |
| Accrued Salaries and Wages           | \$ 750.00    |
| Other Accrued Obligations            |              |
| Other Liabilities                    | \$ 500.00    |
| <b>Total Liabilities</b>             | \$ 1,924.86  |
| Capital Stock                        |              |
| Retained Earnings                    |              |
| <b>Total Equity</b>                  |              |
| <b>Total Liabilities and Equity*</b> |              |

\* Total Assets = Total Liabilities and Equity

### PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges (List only maximum charges per mile or trip, and/or hourly rate):

*\$ 1.75 - PER MILE  
HOURLY RATE - \$100.00*

Requested Scope of Authority: Check all counties in which you are requesting permission to operate.  
You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

- |                                     |                                       |                                     |                                     |   |
|-------------------------------------|---------------------------------------|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Abbeville  | <input type="checkbox"/> Cherokee     | <input type="checkbox"/> Florence   | <input type="checkbox"/> Lee        | <input type="checkbox"/> Saluda               |
| <input type="checkbox"/> Aiken      | <input type="checkbox"/> Chester      | <input type="checkbox"/> Georgetown | <input type="checkbox"/> Lexington  | <input type="checkbox"/> Spartanburg          |
| <input type="checkbox"/> Allendale  | <input type="checkbox"/> Chesterfield | <input type="checkbox"/> Greenville | <input type="checkbox"/> Marion     | <input type="checkbox"/> Sumter               |
| <input type="checkbox"/> Anderson   | <input type="checkbox"/> Clarendon    | <input type="checkbox"/> Greenwood  | <input type="checkbox"/> Marlboro   | <input type="checkbox"/> Union                |
| <input type="checkbox"/> Bamberg    | <input type="checkbox"/> Colleton     | <input type="checkbox"/> Hampton    | <input type="checkbox"/> McCormick  | <input type="checkbox"/> Williamsburg         |
| <input type="checkbox"/> Barnwell   | <input type="checkbox"/> Darlington   | <input type="checkbox"/> Horry      | <input type="checkbox"/> Newberry   | <input type="checkbox"/> York                 |
| <input type="checkbox"/> Beaufort   | <input type="checkbox"/> Dillon       | <input type="checkbox"/> Jasper     | <input type="checkbox"/> Oconee     |   |
| <input type="checkbox"/> Berkeley   | <input type="checkbox"/> Dorchester   | <input type="checkbox"/> Kershaw    | <input type="checkbox"/> Orangeburg | <input checked="" type="checkbox"/> Statewide |
| <input type="checkbox"/> Calhoun    | <input type="checkbox"/> Edgefield    | <input type="checkbox"/> Lancaster  | <input type="checkbox"/> Pickens    |   |
| <input type="checkbox"/> Charleston | <input type="checkbox"/> Fairfield    | <input type="checkbox"/> Laurens    | <input type="checkbox"/> Richland   |   |





Reddyice

FAX MESSAGE

TO: Public Services Commission  
CLERK OFFICE  
DATE: JUNE 26, 2012  
FAX: 803-896-5199

FROM: BB's Limo Services  
WILLIAM C. Blank  
FAX# 843-745-0971

NUMBER OF PAGES: 4  
(INCLUDING COVER)

MESSAGE: ATTN: "TRICA"  
INSURANCE QUOTE

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Jun 25 2012 11:54:28 18666568266

->

8438999891 Geico

Page 882

NICO-Rate for South Carolina

Columbia Insurance Company

### Account Summary For WILLIAM BROWN



Quote #: 1345038  
 Status:

Originally Quoted: 1/21/12 12:00 AM  
 Quote Printed: 6/26/2012 11:52 AM EDT  
 Proposed Effective: 6/26/2012 12:00 AM  
 Proposed Expiration: 6/26/2013 12:00 AM

| Symbol       | Coverage         | Limit (\$)             | Premium (\$)      |
|--------------|------------------|------------------------|-------------------|
| 7            | Liability        | 100,000/300,000/50,000 | 3,116             |
| 7            | UM - BIPD        | 100,000/300,000/50,000 | 684               |
| 7            | UIM - BIPD       | 100,000/300,000/50,000 | 659               |
|              | Medical Payments | N/A                    | N/A               |
| 7            | Physical Damage  | See Specific Unit      | 616               |
|              | Total Ins Value  | 8,000                  |                   |
| <b>Total</b> |                  |                        | <b>\$8,053.00</b> |

Quoted By: GEICO Online Commercial

One GEICO Blvd  
 Fredericksburg, VA 22412

geicocommquote@geico.com

Revision: 71SC2011R03

#### Vehicle Information

NICO-Rate Version: 8.3.18.13

| Unit                               | Liability           | UM  | UIM | Med Pay | Phys Dam | Cargo/<br>In-Tow | All/Lessor | Unit<br>Sub Total |
|------------------------------------|---------------------|-----|-----|---------|----------|------------------|------------|-------------------|
| 1 1999 LINCOLN TOWN CAR<br>(02188) | 3,116               | 684 | 659 | N/A     | 616      | N/A              | N/A        | 5,053             |
| Comp/Coll: 58,000                  | Deductible: 500/500 |     |     |         |          |                  |            |                   |
| Radius: Up to 300 Miles            |                     |     |     |         |          |                  |            |                   |



Exhibit Fit, Willing, and Able (FWA)

WILLIAM C. BROWN

Name of Applicant

1. Are there currently any outstanding judgments against the Applicant?

- Yes                       No

If Yes, indicate nature of judgement(s) against applicant.

2. Is Applicant familiar with all statutes and regulations, including safety regulations and governing for-hire motor carrier operations in South South Carolina, and does Applicant agree to operate in compliance with these statutes and regulations?

- Yes                       No

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated therewith?

- Yes                       No

Exhibit on Driver Qualifications

1. Applicant understands that all drivers must be a minimum of 18 years of age.

- Yes                       No

2. Applicant understands that a certified copy of the driver's three (3) year driving record issued by the SC DMV and such record from the DMV of the state in which the driver is or has been domiciled for such period must be maintained in the Applicant's business office.

- Yes                       No

3. Applicant understands that a criminal history background check from the state where the driver currently lives must be maintained in the Applicant's business office.

- Yes                       No

4. Applicant understands that all drivers operating a vehicle under a Class C Taxi Certificate must have in their possession when operating a charter vehicle, a valid driver's license issued by the SC DMV or the current state of residence of the driver.

- Yes                       No

5. Applicant understands that all Class C Taxi Certificate holders are prohibited from employing or leasing vehicles to drivers who are registered, or required to be registered, as sex offenders with the South Carolina State Law Enforcement Division or any national registry of sex offenders.

- Yes                       No

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA  
POST OFFICE DRAWER 11649  
COLUMBIA, SOUTH CAROLINA 29211

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (Volume 26, S.C. Code Ann. Regs., 1976), and R.38-400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 23A, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

William C. Brown  
Applicant's Signature

Owner  
Title of Applicant (e.g. President, Owner, etc.)

STATE OF SOUTH CAROLINA )  
COUNTY OF Bekeley )

SWORN TO BY ME  
This 2 day of June, 2012  
Mae Alice Brown  
Notary Public  
My Commission Expires 2/17/2020  
Commission Expires \_\_\_\_\_

